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01 FC:2501 02 FC:1504 755.00 OP 300.00 OP				08/17/09	Cyrthia E. 7	Caden (Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/796,643 TITLE OF INVENTION: P	03/08/2004 ROTECTED SEAL FO	OR A FILTERED VENT	Percival C. Banks IN A STERILIZATIO		BANKS 0401	2231
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID ISSU		
nonprovisional	YES	\$755 	\$300	\$0	\$1055	08/17/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS			
YOO, REGINA M 1797 1. Change of correspondence address or indication of "Fee Address" (3)			422-292000			
CFR 1.363). Change of correspond Address form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. 3. ASSIGNEE NAME ANE	dence address (or Chai 22) attached. tion (or "Fee Address" or more recent) attach	nge of Correspondence Indication form ed. Use of a Customer	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type)			
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